24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	C C00448696
	O contact
Check if 24-hour report X 48-hour report New report Amends report file	d on M M / D D / Y Y Y Y Y
Full Name of Payee Senate Conservatives Fund	Date of Public Distribution/Dissemination
	08 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 388	Amount
City State Zip Code	893.35
Alexandria VA 22313-0388	Transaction ID : E804C62292A3543709D2 Date of Disbursement or Obligation
Purpose of Expenditure IE-Ernst-Online Processing Category/ Type	08 / 16 / 2014
Name of Federal Candidate Support Office	ce Sought: House District:
Joni K Ernst Oppose	President State: IA
Calendar Year-To-Date Per Election for Office Sought Disk 201-	oursement For: Primary General 4
Full Name of Payee	Date of Public Distribution/Dissemination
Alliance Strategies Group Inc.	08 20 2014
Mailing Address 7700 Congress Ave	
Ste 3208	Amount
City State Zip Code	9416.66
Boca Raton FL 33487-1358	Transaction ID : EA6E0792ADC4B460D908 Date of Disbursement or Obligation
Purpose of Expenditure IE-Ernst-Email List Rental Category/ Type	08 / 20 / 2014
Name of Federal Candidate Support Office	ce Sought: House District:
Joni K Ernst Oppose	President X Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disl 201	bursement For: Primary General 4 ✓ Other (specify) General 2014
(a) SUBTOTAL of Itemized Independent Expenditures	10310.01
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	10310.01
Under penalty of perjury I certify that the independent expenditures reported herein were not new with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Paul Kilgore [Electronically Filed] Date	08 20 2014
Signature	